

County of SanDiego HEALTH SERVICES ADVISORY BOARD 1600 Pacific Highway, San Diego, CA 92101-2417

Tuesday, July 6th, 2021 3:00pm to 5:00pm Microsoft Teams MEETING MINUTES

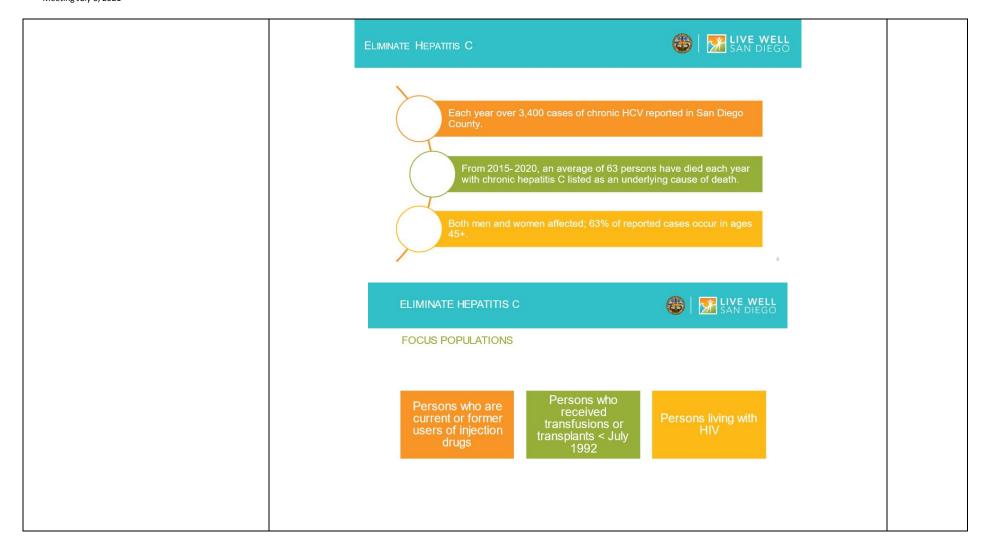
Members Present	Members Absent/Excused	Presenters	HHSA Support
Afflalo, Suzanne, Dr., Vice Chair	Dailey, Jack (Alternate)	Sunset Document, Article LV,	Dr. Wilma Wooten,
Alverson Rodriguez, Lisa	Ohmstede, Jennipher (Alternate)	additions for approval by	Public Health Officer
Arroyo, Geysil	Tuttle, Henry	HSAB	& Director, PHS
Correa, Linda	Wade, Lindsay (Alternate)	Presentation	
Hailey, Katelyn	Alexiou, Dimitrios	HSAB Budget Sub-Committee	Dr. Elizabeth
Jantz, Barry	Remington-Cisneros, Therese	James Lepanto	Hernandez, Assistant
Knoll, Gregory	Schultz, James		Director, PHS
Lepanto, James Chair	Danielle, Dorrington	Hepatitis C Elimination	
Melgoza, Ana	Wooten, Wilma, Dr.	Implementation Plan Board	Dr. Anuj Bhatia,
Seldin, Harriet (Alternate)	Fraser, Tim (Alternate)	Letter	Deputy Director, PHS
Sumek, Caryn (Alternate)	Hegyi, Paul	Presentation	
Waters, Todd	Shaplin, Judith	Seema Shah, MD, Epidemiology	Dr. Kelley Motadel,
Bhatia, Anuj, Dr.	Motadel, Kelly, Dr.	and Immunizations Services	Child Health Officer,
Hernandez, Elizabeth, Dr.	Orozco-Valdivia, Barbara	Branch Medical Director, Scott	MCSD
Hirsch, Pedro		Suckow, VPI Strategies	
Barry, Jantz		Suckey, VI I Strategies	Dr. Ankita Kadakia,
Quijada, Prisci			Medical Director and
Loose, Patrick			Branch Chief, TCRH
Johnson, Jeff			
Yates, Judith			Dr. Maggie
Santibanez, Maggie			Santibanez, AMSA,
Shah, Seema, Dr.			TCRH
Suckow, Scott			
			Adrienne Yancey,
			Acting Branch Chief,

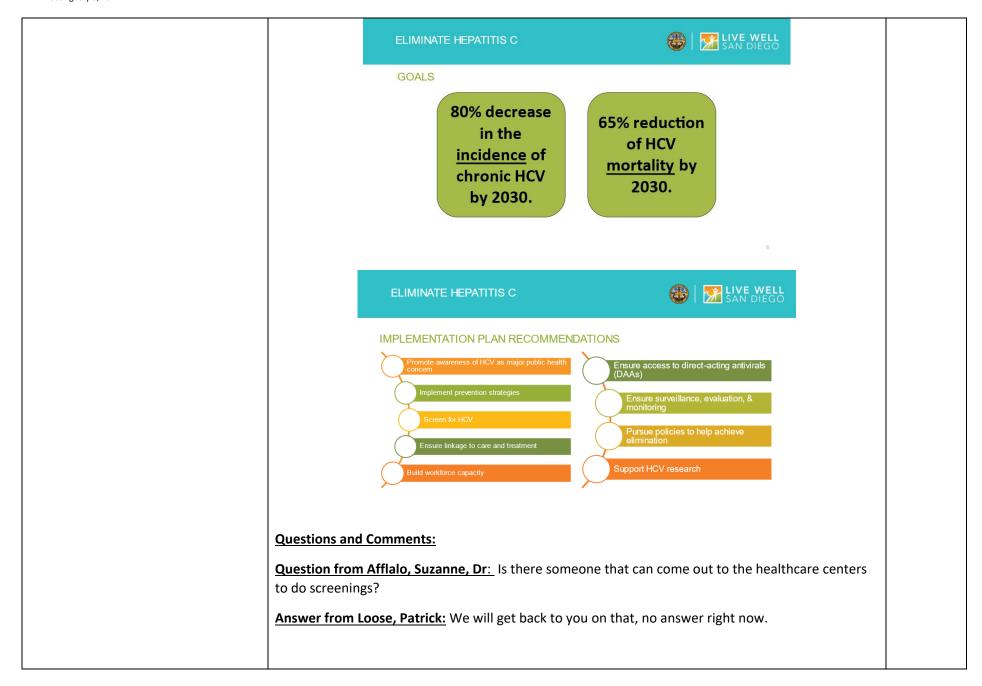
Members Present	Members Absent/Excused	Presenters	HHSA Support
			MCFHS
			Romina Morris, Dep.
			Budget Mgr., PHS
			A1: 6: 1
			Alison Sipler,
			Program Coordinator, MCFHS
			Coordinator, MCFHS
			Christine Bride,
			HPPS, MCFHS
			Danielle Dorrington,
			Admin. Analyst III.
			PHS Admin
			Rodrigo Ibanez,
			Admin Analyst III,
			TCRH
			Catherine Bender,
			TEP, TCRH
			TEI, TORTI
			Marti Brentnall,
			CHPS, TCRH
			Pedro Hirsch,
			Administrative
			Secretary II, PHS
			Admin
			Anna Mai Tuinh
			Anna-Mai Trinh Administrative
			Secretary II, PHS
			Admin
			Additional COSD
			Staff Present:

Members Present	Members Absent/Excused	Presenters	HHSA Support
			Amy Thompson,
			Executive Finance
			Director, HHSA
			Ardee Apostol, Asst.
			Group Finance Dir,
			HHSA
			1111371
			Other Attendees:
			Barbara Orozco-
			Valdivia, Stakeholder
			Engagement Manger,
			Blue Shield California
			Samhita Ilango,
			Student

Minutes	Lead	Follow- up Actions	Due
	James Lepanto	Doodle Poll re Retreat for James	
		Send copy of PPP COVID WATCH to Board for Dr. Bhatia	
Next Meeting: HSAB Me	eting: Tuesday Aug	ust 3 rd 2021, 3:00 – 5:00 pm – Microsoft Teams	
Agenda It	Item Discussion		
I. Welcome & Int	roductions	1. James Lepanto called the meeting to order at 3:04 PM.	
		2. Roll call was noted, and quorum established.	
		3. Introduction of Prisci Quijada by Dr. Bhatia	
		4. Words by Prisci Quijada	

II. Public Comment	No public comment.	
III. Action Items	 Approval of July Agenda and June Meeting Minutes a. Agenda: Moved by Arroyo Geysil and seconded by Barry Jantz. b. Minutes: Moved by Katelyn Hailey and seconded by Seldin Harriet. All HSAB members in attendance voted Aye, with no oppositions or abstentions. The motions carried and the documents were approved. 	
IV. Hepatitis C Elimination Implementation Plan Board Letter Presentation Seema Shah, MD, Epidemiology and Immunizations Services Branch Medical Director, Scott Suckow, VPI Strategies	 HHSA is seeking HSAB's concurrence on the following recommendations to the Board of Supervisors: Receive the Eliminate Hepatitis C San Diego County Initiative Implementation Plan Authorize the Agency Director, Health and Human Services Agency, to pursue funding opportunities for current and future fiscal years related to hepatitis C elimination efforts Background Hepatitis C is a liver disease caused by the hepatitis C virus (HCV). Can cause liver cirrhosis (scarring), liver cancer, liver failure, and death. An estimated 3.5 million people in the United States have chronic hepatitis C. An estimated 400,700 Californians live with chronic HCV, but many do not know they are 	
	 An estimated 400,700 Californians live with chronic HCV, but many do not know they are infected. 	





<u>Comment from Knoll, Gregory:</u> You are one of the best presenters, and thank you to Scott for helping out. You're reccomendations are spot on and whatever you need from us we will get them for you.

<u>Question from Knoll, Gregory</u>: What is your penetration into communities of color and into forgetten neighborhoodds/ people, unhoused?

Answer from Loose, Patrick: Not good enough yet, one of the primary population that I think about are person who currently using/injecting drugs because of the long standing prohibiton on needle exchange but there is no robust service delivery system to address their needs and not enough trust with them. We are work ing with a lot of health care centers that are building the trust within these communities.

<u>Comment from Knoll, Gregory</u>: Making yourself available will build that trust. We need a plan to reach out.

<u>Comment from Suckow, Scott:</u> Each of the 9 recomendations drill down into what you're asking for, where there are strategies and tactics we can flush out. Looking at numver 4 "Ensure linkage to care and treatment". Behind each of these rec. there are a lot of details we can go.

<u>Question from Knoll, Gregory</u>: Your presentation has binded an actual plan, who is going to implement this plan?

<u>Comment from Lepanto, James:</u> I think we did see a more comrehensive at one point. Thank you Scott. The amount of effort that went into this, reaching out to the communities and creating a plan is a lot of work so thank you. I think there is momentum for the needle exchange.

Question from Seldin, Harriet: Is there anything going on in terms of vac. development for Hep C? **Answer from Suckow, Scott:** Nothing current.

Patrick Loose walks through Board Letter

Motion:

- 1. Moved by Greg Knoll and seconded by Geysil Arroyo.
- 2. The motions carried and the documents were approved.

V. Sunset Document, Article LV Presentation Anuj Bhatia

ARTICLE LV SAN DIEGO COUNTY HEALTH SERVICES ADVISORY BOARD*

*Note -- Article LV, San Diego County Health Services Advisory Board, consisting of §§ 861--861.11, added by Ord. No. 8123 (N.S.), adopted 8-4-92, effective 9-3-92.

Cross reference(s) -- Definitions, § 20 et seq.; general rules, § 50 et seq.; powers and duties of officers, boards, and commissions, § 51; appointment and removal, § 52.

SEC. 861. SAN DIEGO COUNTY HEALTH SERVICES ADVISORY BOARD.

There is hereby created and established the San Diego County Health Services Advisory Board. The Health Services Advisory Board shall constitute a citizens advisory board on public health as required by Section 710 of the County Charter. This Board is established to advise the Board of Supervisors, and the Health and Human Services Agency regarding programs, issues and budget items pertaining to the Health and Human Services Agency as defined in Section 861.8 of this County Administrative Code. (Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8835 (N.S.), effective 11-6-97; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.1. MEMBERSHIP AND SELECTION.

The Board shall consist of seventeen (17) members. All members shall represent the entire area and population of the County in the performance of duties. Persons appointed to the Board shall have demonstrated interest and experience in the needs of the Health and Human Services Agency. The members shall serve during their terms at the pleasure of the Board of Supervisors and any member may be removed at any time by a majority vote of the Board of Supervisors or by the member's failure to meet the regularly scheduled meeting attendance requirements. All members shall be voting members of the Board, provided, however, that each member may designate an alternate in writing, and the alternate shall be entitled to vote on Board matters in the absence of the member.

Each member of the Board of Supervisors shall nominate and recommend for appointment by the Board of Supervisors two (2) members to the Board from the following categories:

Physicians representing traditional health care providers serving low income and indigent populations, each physician to be affiliated with one or more minority health care provider organizations in San Diego County.

Representatives of academic institutions active in the training and education of health professionals in San Diego County.

Representatives of business, recommended by the San Diego Regional Chamber of Commerce and other Chambers of Commerce located in San Diego County or by the San Diego County Taxpayers Association; Representative of organized-labor groups active in the health care industry of San Diego County;

Representative of rural health organizations recommended by the Director of the Health and Human Services Agency and the Chief Administrative Officer to achieve geographic and ethnic balance;

Representatives of minority health organizations recommended by the Director of the Health and Human Services Agency and the Chief Administrative Officer to achieve geographic and ethnic balance;

Representatives of legal services organizations representing indigent populations; and

Others who are residents of San Diego County, consumers, or professional advocates.

In addition, the following seven (7) persons shall be members of the Board or shall designate representatives from their organizations who shall be members:

Chief Executive Officer of the San Diego County Medical Society,

President and Chief Executive Officer of the Hospital Association of San Diego and Imperial Counties,

Chief Executive Officer of the Health Center Partners of Southern California,

Chief Executive Officer of the Consumer Center for Health Education and Advocacy,

Chair of the San Diego County Behavioral Health Advisory Board,

Chair of the Healthy San Diego Professional Advisory Board, and

Chair of the Healthy San Diego Consumer Advisory Board.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8509 (N.S.), effective 4-6-95; amended by Ord. No. 8835 (N.S.), effective 11-6-97; amended by Ord. No. 8910 (N.S.), effective 6-18-98; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15; amended by Ord. No. 10438 (N.S.), effective 10-13-16)

Cross reference(s) -- Board of supervisors, § 500 et seq.

SEC. 861.2. EXCLUSIONS.

- (1) An employee of the County shall not serve as a voting member on the Board.
- (2) No person shall be appointed to the Board if by reason of such employment a conflict of interest could arise. Appointment by the court of an attorney to represent an individual shall not be considered a conflict of interest.
- (3) Members of County citizen advisory committees shall disclose to the Clerk of the Board of Supervisors in writing any outside employment or activity engaged in for compensation which relates to their County duties or to the functions and responsibilities of the County department or agency which they serve or which may be subject to approval by any County officer or employee.

No member of an advisory committee shall make, participate in making or in any way attempt to use his or her position as a member of an advisory committee to influence a decision in which he knows or has reason to know that he has a financial interest, except in those cases where the member is appointed to represent an entity or group having a financial interest in a matter coming within the citizen committee's area of responsibility.

No person shall be appointed to or serve on, an advisory committee which participates in the making of County contracts in which such person is financially interested within the terms of Government Code section 1090 et seq. This prohibition is not applicable to persons with "remote interests" as defined in

subdivision (b) of Government Code Section 1091, provided that the person discloses the interest in accordance with subdivision (a) of Government Code Section 1091 and the person does not influence or attempt to influence other advisory committee members to act favorably in respect to the contract in which the person has a remote interest.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.3. TERM OF OFFICE.

Members nominated by a Supervisor shall serve a term of office concurrent with the term of office of their nominating Supervisor. The terms shall expire on the date of expiration of the term of the nominating member of the Board of Supervisors or at such time as said member of the Board of Supervisors ceases to hold office, whichever first occurs. The reelection of a member of the Board of Supervisors for a succeeding term shall not automatically extend the term of any board member.

The persons, if any, who are members of the Health Services Advisory Board because they hold one of the following positions or are designated by such person to represent their organization shall serve on the Board until a successor has been chosen for the position, at which time the successor shall become a member of the Board:

Chief Executive Officer of the San Diego County Medical Society;

President and Chief Executive Officer of the Hospital Association of San Diego and Imperial Counties;

Chief Executive Officer of the Health Center Partners of Southern California;

Chief Executive Officer of the Consumer Center for Health Education and Advocacy;

Chair of the San Diego County Behavioral Health Advisory Board;

Chair of the Healthy San Diego Professional Advisory Board; and

 ${\it Chair\ of\ the\ Healthy\ San\ Diego\ Consumer\ Advisory\ Board}.$

Any member whose term has expired hereunder shall continue to discharge the duties as a member until a qualified successor has been appointed.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8509 (N.S.), effective 4-6-95; amended by Ord. No. 8910 (N.S.), effective 6-18-98; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15; amended by Ord. No. 10438 (N.S.), effective 10-13-16)

SEC. 861.4. VACANCIES.

A vacancy shall occur as a result of any of the following events before the expiration of the term:

- (1) The death of the incumbent.
- (2) The resignation of the incumbent.
- (3) Unexcused absences from more than one-third of the regularly scheduled meetings in any 12-month period or three consecutive regularly scheduled meetings.
- (4) Or for any reason specified in Government Code Section 1770.

When a vacancy occurs as the result of missing one-third of the regularly scheduled meetings in one 12-month period or three consecutive regularly scheduled meetings, both the member, the nominating Supervisor, if any, the Chief Administrative Officer and the Director of the Health and Human Services Agency shall be notified by the Board Chair. Vacancies shall be filled by nomination as set forth in Section 861.1. (Exception: Board of Supervisors' appointees may not be removed without the approval of the appointing authority.)

If a vacancy occurs, a new appointee shall serve for the unexpired term of the member being replaced. (Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8509 (N.S.), effective 4-6-95; amended by Ord. No. 8835 (N.S.), effective 11-6-97; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.5. ORGANIZATION.

- (a) Officers. The Board shall select from its membership a Chair and a Chair-Elect to serve for a two-year term. The maximum length of a given office shall be two consecutive terms.
- (b) Rules. The Board shall prepare and adopt the necessary rules and regulations for the conduct of its business.
- (c) Quorum. A majority of members currently appointed to the Board shall constitute a quorum. A majority of members in attendance shall be required to take action.
- (d) Minutes. The Board shall keep written minutes of its meetings, a copy of which shall be filed with the Clerk of the Board of Supervisors and posted on the HSAB webpage.
- (e) Meetings. The Board shall establish a regular meeting schedule and shall give public notice of the time and place of meetings in compliance with the requirements of the Brown Act. All meetings of the Board shall be open and public and all persons shall be permitted to attend any meetings of the Board.
- (f) Staff Requests. County citizen committees are charged with advising the Board of Supervisors on the policies the Board establishes to guide the various functions of the County, and on the established procedures by which such functions are performed. Unless specifically designated in their establishing authority, the advisory committees are not charged with advising the Chief Administrative Officer regarding his or her function and responsibility to carry out the Board's policy decisions. Recognizing that this delineation of administrative authority has been established in County Charter section 501.9-Noninterference, Board Policy A-98, and Board Policy A-72, requests from advisory committees which will involve response from County management staff should informally be in writing and signed by the Chair of the advisory committee. Staff response requiring less than four (4) hours to research, prepare and submit an answer to specific requests readily obtainable should be responded to in an expeditious manner by the office or department to which addressed or assigned. More involved requests shall be discussed by the Chief Administrative Officer with the Chair of the Board of Supervisors and if necessary the requestor, and docketed with the Board for its direction. If the Board directs the Chief Administrative Officer to respond to the request, the Chief Administrative Officer will assign the matter to the appropriate staff within the County organization and monitor its progress to assure complete, coordinated and timely response.
- (g) Government Code section 1098: County Citizen Committees shall be subject to the provisions of

Government Code section 1098 - Confidential information; use or disclosure for pecuniary gain. (Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.6. ESTABLISHMENT OF SUB-COMMITTEES.

- (a) Standing Sub-committees. The Board will appoint Standing Sub-committees in accordance with its by-laws. Any committee that functions regularly and whose membership is appointed annually shall be a Standing Sub-committee.
- (b) Ad Hoc Sub-Committees. The Board may appoint sub-committees for the purpose of carrying out the functions and duties of the Board. Any sub-committee appointed shall consist of not fewer than three members, including at least one voting Board member. The actions and recommendations of sub-committees shall not be deemed the action of the Board or its members.
- (c) Volunteer and Consultant Services. The Board shall engage the services of volunteer workers and consultants without salary as it may find necessary from time to time. Service of an individual as a volunteer worker or as a consultant shall not be considered as service for or employment by the County. (Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8910 (N.S.), effective 6-18-98; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.7. COMPENSATION AND EXPENSES.

Members of the Board shall serve without compensation. Board members shall be reimbursed for expenses incurred in performing their duties under this article, including mileage reimbursement in accordance with applicable County Administrative Code provisions.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.8. DUTIES AND RESPONSIBILITIES.

The Board shall have the following duties and responsibilities:

- 1) To review and make recommendations on new policies and programs within the Health and Human Services Agency. Any policy or program advice by the Committee which impacts the administration of the County will be referred to the Chief Administrative Officer for his or her review and comment.
- 2) To review the Health and Human Services Agency's annual budget and provide written comments and recommendations to the Board of Supervisors and the Director of the Health and Human Services Agency.
- 3) To examine the variables which impact access to health care and to develop an integrated set of recommendations aimed at an improved health care delivery system. Develop recommendations which enhance coordination of the local health care system.
- 4) To review current and proposed health-related legislation and recommend support, opposition or propose change to the Board of Supervisors, and the Director of the Health and Human Services Agency to pursue further action through appropriate legislative channels.

- 5) To solicit and provide a forum for public input, advice, and proposed solutions and alternatives on critical health issues and problems in the community and faced by the County government.
- 6) To serve as the designated nominating authority for membership on designated advisory committees and forward these nominations to the Board of Supervisors for appointment.
- 7) To assist the Director of the Health and Human Services Agency in assessing those community issues which could result in a fiscal impact on the County government, and making recommendations regarding such impacts.
- 8) To perform such other duties as may be assigned by the Board of Supervisors. (Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8509 (N.S.), effective 4-6-95; amended by Ord. No. 8835 (N.S.), effective 11-6-97; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15) Cross reference(s) -- Powers and duties of officers, boards, and commissions, § 51.

SEC. 861.9. REPORTS.

The Board shall make available to the Board of Supervisors, the Chief Administrative Officer and the Health and Human Services Agency its findings and recommendations on issues presented to them, and submit an annual written report of its activities to the Board of Supervisors and the Director of the Health and Human Services Agency.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8835 (N.S.), effective 11-6-97; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 9894 (N.S.), effective 12-6-07; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

SEC. 861.10. STAFF ASSISTANCE.

The Director of the Health and Human Services Agency shall ensure the provision of the necessary staff assistance to the Health Services Advisory Board.

(Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 8835 (N.S.), effective 11-6-97; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 10371 (N.S.), effective 2-26-15) Cross reference(s) -- Chief Administrative Officer, § 120 et seq.

SEC. 861.11. SUNSET.

This Article shall be reviewed as a part of the regularly scheduled sunset review process. (Added by Ord. No. 8123 (N.S.), effective 9-3-92; amended by Ord. No. 9070 (N.S.), effective 9-9-99; amended by Ord. No. 10371 (N.S.), effective 2-26-15)

Questions and Comments:

Question from James Lepanto: This is being done for all boards right?

Answer from Anuj Bhatia: Yes.

Question from Gregory Knoll: What is being done?

<u>Answer from Anuj Bhatia:</u> A review of the articles that govern how the advisory boards are run, in terms of county ordinance. There is no modifications being reccommended.

<u>Comment from Harriet Seldin:</u> The last time we had reveiws and comments to some changes. We made it more narrow and the language less descirptive.

Question from Gregory Knoll: When was the last time we looked at this and made changes or is this the original?

<u>Answer from Anuj Bhatia:</u> There has been some changes in the past, this is the first one since I've joined the county that I looked at. It's specificically to the board and been pointed to the bilaws to be more descripted. No changes.

<u>Comment from James Lepanto:</u> The ordinance is for the board, the more operatinal is our bilaws which we have changed a couple times and it goes to the county for a vote. Changes have been made and approved

Question from Barry Jantz: Should alternates to the HSAB be in here?

<u>Answer from James Lepanto:</u> I know it's in the bilaws and it's been approved. But no alternate in the documents.

<u>Answer from Anuj Bhatia:</u> It's not in the document.

Motion: 1. Moved by Greg Knoll and seconded by Todd Walters. 2. The motions carried and the documents were approved. **EXTENSIVE:** Comment from Gregory Knoll: If Anuj can figure out a place to put "all board members should name an alternate" on the document. Comment from James Lepanto: The county know we have alternates, we should move forward with the way it is. VI. Chair's Report Comment from James Lepanto re all these topics Comment from Gregory Knoll: There was a decision made in the early 90's that the state of california is going to try their best to get as many necks out into manage care. Some of us thought they meant cost. There were 3 different types of manage care and they are done by the county. Pay capitated rates that were guaranteed. Pilot program, for geographic manage care, that requires some involvment of the community in terms of over sight but it was health plans for profit. Comment from James Lepanto: This is important for HSAB members to be involved. The goal was to give you guys information who were not familiar with this. Comment from Sumek Caryn: Thank you for the over view. July 13th the BOS will have a presentation and lay out some of the ways they can get stakeholders and community input. In comments: CARYN and Dr. Afflalo said 'hybrid' Comment from Barry Jantz: disagree with comments, we should do hybrid. **ACTION ITEM:** Doodle Poll re Retreat for James A. Outreach to Supervisors and Board Aides B. Scheduling HSAB Advance. C. Annual Report D. Community Inspiration Awards E. HSAB Youth Board Member F. COVID-19 Updates. Press Briefings on County Facebook page: https://www.facebook.com/sandiegocounty/

VII. Covid-19 Update		
Present		
Shah Seema, Dr.		
	HSAB -	
	07.06.2021-1337.ppt	
	Question from James Lepanto: What is San Diego strategies?	
	Answer from Shah Seema: Not a forward moving plan, it's already in place. The outreach looking at the accesibility issue. Looking at datas on why they are hesitant. How we educate provideres with one on one and obtain trust.	
	Question from Gregory Knoll (Various): How are you going to verify vac. proof? Answer from Shah Seema (Various): The vac. is dependent on the situation.	
	Question from Afflalo, Suzanne, Dr (Various): Is there any targeted way to get African American community to	
	get vaccinated?	
	Answer from Shah Seema (Various): We've been working with many ogranization to help understand. Talking	
	to various providers can be one solution. We're trying to have physicians and nurses speak to people.	
	Question from Judith Yates: Is the data by region in the Covid watch?	
	Answer from Shah Seema: Yes, it is in the Covid watch.	
	Comment from Gregory Knoll: G-mapping should be implemented.	
	ACTION ITEM: Send copy of PPP COVID WATCH to Board for Dr. Bhatia	
VIII. Informational Items	A. Subcommittee and Work Group Updates.	
	Policies & Program.	
	Budget.	
	Legislative Committee.	

	Community Inspiration Awards Work Group	
	Comment from James Lepanto re all these topics	
	No questions/comments	
IX. Round Table	No comments or questions	
X. Public Comment (on agenda items)	No public Comments	
XI. Adjournment	Meeting adjourned at 4:57 pm.	
XII. Supplemental Information	Next HSAB Meeting: Tuesday August 3, 2021, 3:00 – 5:00 pm – Microsoft Teams	